

ISSUE SLIP STATE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SC		1-25-99
O.I.P.E. CLASSIFIER		59	127
FORMALITY REVIEW	JK	71555	2-5-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	9/91	
2	✓	2/02	
3	✓	3/02	
4	✓	2/03	
5	✓	2/04	
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21	✓	✓	✓
22		✓	0
23		0	0
24		✓	0
25		✓	0
26		0	0
27		✓	0
28		✓	0
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30		✓	0
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BEST AVAILABLE COPY If more than 150 claims or 10 actions
 staple additional sheet here

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